

TOWN OF FLORENCE  
P.O. BOX 2670  
FLORENCE, AZ 85232  
520-868-7680 OR 520-868-7624

UTILITY CHANGE FORM

ACCOUNT# \_\_\_\_\_

Name: \_\_\_\_\_

Service Address: \_\_\_\_\_  
(Please Print)

☐ **CHANGE OF ADDRESS**

New Mailing Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Phone # \_\_\_\_\_ (H) \_\_\_\_\_ (MSG) \_\_\_\_\_ (Other)

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☐ **GARBAGE SERVICE: (CHECK APPROPRIATE BOX FOR SVC REQUESTED)** ☐ TEMPORARY DISCONNECT  
☐ RECONNECT

Date service is to be Discontinued: \_\_\_\_\_

Approximate date of return: \_\_\_\_\_

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☐ **DISCONTINUE ALL SERVICES:**

If you are not returning or you choose to discontinue all services:

Date service is to be Terminated: \_\_\_\_\_

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**ALL FORMS MUST BE SIGNED AND DATED BELOW:**

Customer Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Comments: \_\_\_\_\_